File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, lowa 50319 Fax: 515-281-4073





COMMITTEE NAME (Must be same as on Statement of Organ	nization)		
WILHELM FOR IOWA SENATE		FORM	
IMPORTANT: Indicate by # type of committee you are reporting for: (1)Statewide/Legislative/Judge Standing for Retention Candidate (2 (4)County Central Committee (5)County Candidate (6)City Candid Subdivision Candidate (8)County PAC (9)City PAC (10)School B 11) Local Ballot Issue)State PAC (3)State Party late (7)School Board or Other Political	DR-2 (Rev. 07/200) For Office Use Comm. #	<u></u>
CANDIDATE COMMITTEES ONLY:	Detti - I Deute (Consultanti)	Logged In	
Candidate Name MARY JO WILHELM	Political Party (if applicable) DEMOCRAT	1 1	
Office Sought STATE SENATE	District (if Senate or House) 08	Audited	s pages
Late reports are subject to possible civil and criminal penalties. Pur SIGNATURE OF PERSON FILING REPORT	suant to Iowa Code sections 68B.32A(7) 563 5 17-5705 TELEPHONE	7-16-	
I AM FILING A	REPORT FOR (1) ELECTION /(2	NON-ELECTION	YEAR
(report date)	Indicate by #		TEAK.
☐CHECK IF AMENDMENT TO REPORT DATED		cal Committees, ente	r Date of Election
☐ Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed.	,	unty & Local Commit ich Election is held	ees, enter County in
STATEMENT OF CASH ON HAND			
CASH ON HAND at the beginning of the reporting period. (Tot committee. This amount MUST be the same as the confidence of the last reporting period or must be zero if this is fire.)	ash on hand at the end	\$ 4,074.2	29
ADD TOTAL MONEY TAKEN IN THIS PERIOD			
Schedule A: Cash Contributions total (Attach Schedu	ule A) (*also see in-kind below)	1,996.0)0
Schedule F: Loans Received total (Attach Schedule	F)	0.00	
Schedule H: Total Sales of Campaign Property (Atta		0.00	
(Schedule H applies to Candidates' Comm	nittees Only) SUB-TOTAL	\$ 6,070.2	29
SUBTRACT TOTAL MONEY SPENT THIS PERIOD			
Schedule B: Expenditures total (Attach Schedule B)	(**also see debts and loans below)	1,182.0	51
Schedule F: Loan Repayments total (Attach Schedul	e F)	0.00	
CASH ON HAND at the end of this reporting period (if final rep	ort balance must be zero)	\$ 4,887.0	58
**UNPAID BILLS (From Schedule D - Attach Schedule D)		\$ 0.00	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Sched	dule E)	\$ 0.00	
**OUTSTANDING LOANS (From Schedule F - Attach Schedul	le F)	\$ 525.00)
CONSULTANT BREAKDOWN (Schedule G Attached?)		YES _	✓_NO
CANDIDATE COMMITTEES ONLY:			
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Atta	ch Schedule H)	\$	
STATE COMMITTEES: Submit a reconciled campaign account	nt bank statement in January of each	ear.	

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)	(100.0100)	NECEIP 13
COMMITTEE NAME (Must be same as on Statement of Organization)	— ·	CK THIS BOX IF
WILHELM FOR IOWA SENATE		

SCHEDULE

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MONETARY

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STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
05/23/08	ID# CK#	CONNIE HVITVED 24589 70TH STREET CRESCO, IA 52136	NONE	\$50.00	
05/23/08	ID#	MARIE SEBASTIAN 409 EAST 8TH STREET CRESCO, IA 52136	NONE	25.00	
05/27/08	ID# CK#	LOWELL SOVEREIGN 17371 130TH STREET CRESCO, IA 52136	NONE	50.00	
06/04/08	ID#	VIRGINIA THOMSON 26 3RD AVE NW WAUKON, IA 52172	NONE	50.00	
05/29/08	ID# CK#	MAURICE HOVER 205 OHIO STREET, #7 DECORAH, IA 52101	NONE	25.00	
06/04/08	ID# CK#	ROBERT SOUKUP 213 S. LOCUST NEW HAMPTON, IA 50659	NONE	100.00	
05/22/08	ID# CK#	JAMES ALSTAD 2395 SIEWERS SPRING ROAD DECORAH, IA 52101	NONE	50.00	
06/04/08	ID# CK#	JOHN ANDERSEN 331 S. SHEAKLEY NEW HAMPTON, IA 50659	NONE	25.00	
06/10/08	ID# CK#	BARBARA HAVLIK 10605 CRANE CREEK RD ELMA, IA 50628	NONE	25.00	
06/12/08	ID# CK#	W. JEFFREY ERNST 3312 345TH AVE CRESCO, IA 52136	NONE	100.00	
			SUB-TOTAL	\$ 500.00	

TOTAL (if last page of this schedule)

Page ONE of FIVE (for Schedule A)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)	
WILHELM FOR IOWA SENATE	.

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

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06/12/08	ID# CK#	NANCY BOLSON 610 PARK STREET DECORAH, IA 52101	NONE	\$25.00	INCOME
06/16/08	ID# CK#	CALLIE WEIGEL 707 MAPLE STREET ELMA, IA 50628	NONE	100.00	
06/24/08	ID#	STEVE MURRAY 105 S. BROADWAY NEW HAMPTON, IA 50659	NONE	25.00	
06/18/08	ID# CK#	SUE HERMANSON 1680 OLD STAGE ROAD DECORAH, IA 52101	NONE	25.00	
06/21/08	ID# CK#	PHYLLIS WASTA 310 PLEASANT HILL DRIVE DECORAH, IA 52101	NONE	25.00	
06/20/08	ID# CK#	WILLIAM HECKROTH 1010 RIDGEWOOD BLVD NW WAVERLY, IA 50677	NONE	25.00	
06/27/08	ID#	DAVE WALTON	NONE	20.00	
05/18/08	ID#	KAREN S. PRATTE 1627 BRADY DRIVE	NONE	50.00	
06/26/08	ID# CK#	CHICKASAW COUNTY DEMOCRATS 306 W. PITTS LAWLER, IA 52154	NONE	250.00	
07/11/08	ID#	UNITEMIZED CONTRIBUTIONS	NONE	26.00	1
			SUB-TOTAL	571.00	

TOTAL (if last page of this schedule)

Page TWO of FIFE

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SCHEDULE

MONETARY

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)	(Rev. 07/03)	RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)		CK THIS BOX IF NDING FORM
WILHELM FOR IOWA SENATE		

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
	ID#	JOHN DALY			INCOME
06/10/08	CK#	115 5TH AVE WEST CRESCO, IA 52136	NONE	\$25.00	
	ID#				
06/10/08	CK#	MARY J. RUSSETT BOX 206 FT. ATKINSON, IA 52144	NONE	25.00	
	ID#				l
07/03/08	CK#	HELEN BETH KUHENS 658 SOJOURN LANE HARPERS FERRY, IA 52146	NONE	25.00	
	ID#				
07/03/08	CK#	RICHARD ZAK 317 4TH AVE SE CRESCO. IA 52136	NONE	50.00	
	ID#	CRESCO, IA 32130			<u> </u>
07/03/08	CK#	JEAN SWENSON 415 ASHLAND AVE NEW HAMPTON, IA 50659	NONE	100.00	
	ID#	112 (7 111111 1011) 111 3003)			
	CK#				
****	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	1		SUB-TOTAL	- 225.00	

TOTAL (if last page of this schedule)

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(for Schedule A)

225.00

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)]
WILHELM FOR IOWA SENATE	

SCHEDULE	
A	MONETARY
(Rev. 07/03)	RECEIPTS
	CK THIS BOX IF
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STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
05/19/08	ID#	SUSAN SOVEREIGN 21074 125TH STREET CRESCO, IA 52136	NONE	\$35.00	
05/18/08	ID# CK#	STEVEN JOHNSON 609 STANWOOD DRIVE DECORAH, IA 52101	NONE	25.00	
05/18/08	ID# CK#	PATRICIA IPSEN 1566 KENWOOD AVENUE NEW HAMPTON, IA 50659	NONE	25.00	
05/15/08	ID# CK#	JOHN SMOLA 304 SCOTT HOLLOW ROAD MONONA, IA 52159	NONE	100.00	
05/19/08	ID# CK#	JAN CARMAN 824 WEST 3RD STREET CRESCO, IA 52136	NONE	25.00	
05/19/08	ID#	VICKIE GRUBE 13467 VALLEY AVENUE CRESCO, IA 52136	NONE	15.00	
	ID#				
	ID#				
	ID# CK#				
	ID#				
		-	SUB-TOTAL	• 205¢	

TOTAL (if last page of this schedule)

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Page Four of FIVE (for Schedule A)

\$ 225 W

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)	
WILHELM FOR IOWA SENATE	

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	L CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
05/22/08	ID# CK#	UNITEMIZED CONTRIBUTIONS	NONE	\$20.00	✓
05/22/08	ID# CK#	UNITEMIZED CONTRIBUTIONS	NONE	20.00	/
05/17/08	ID#	RICHARD GUILGOT 1411 LAUREL DRIVE DECORAH, IA 52101	NONE	50.00	
05/22/08	ID#	LUTHER SNOW 409 UPPER BROADWAY STREET DECORAH, IA 52101	NONE	35.00	
05/19/08	ID# CK#	MARK ANDERSON BOX 238 CRESCO, IA 52136	NONE	50.00	
05/19/08	ID# CK#	DAVID HARVEY 941 WOODLAND ROAD CRESCO, IA 52136	NONE	50.00	
05/19/08	ID# CK#	WALTER McINTOSH BOX 272 LIME SPRINGS, IA 52155	NONE	50.00	
05/19/08	ID# CK#	SUSAN HOLSTROM 220 3RD AVE EAST CRESCO, IA 52136	NONE	50.00	
05/19/08	ID# CK#	ROSEMARY MATT 406 VERNON ROAD CRESCO, IA 52136	SISTER	100.00	
05/22/08	ID#	KEVIN KENNEDY 203 S. WALNUT NEW HAMPTON, IA 50659	NONE	50.00	
			SUB-TOTAL	. 1175	

TOTAL (if last page of this schedule)

\$1,996.0

Page FIVE of FIVE (for Schedule A)

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FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
(Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organiz	ation)
WILHELM FOR IOWA SENATE	

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
05/20/08	ID# CK#	DICKEY'S PRINTING 308 EAST 7TH STREET WATERLOO, IA 50701	PRINTING CARDS	\$ 125.73
05/20/08	ID# CK#	MARY JO WILHELM 414 NORTH ELM STREET CRESCO, IA 52136	REIMBURSE FOR PAYMENT TO SETUP WEBSITE	370.00
06/20/08	ID#	CARTER PRINTING 1739 EAST GRAND DES MOINES, IA 50316	PRINTING EXPENSE	318.00
07/10/08	ID# CK#	CARTER PRINTING 1739 EAST GRAND DES MOINES, IA 50316	PRINTING EXPENSE	368.88
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID#			

SUB-TOTAL

\$ 1,192.61

TOTAL (if last page of this schedule)

1,182.61

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

	1		1	
Page		_ of	1	

MMITTEE NAME(Mu	ist be same as on Statement of Orga	nization)	1	F	LO
TLHELM FOR IO	WA SENATE			(Rev. 02/08)	REC
TE: This schedule rep	ports money loaned to the committee	which is deposited in the	committee account.	CHECK -	THIS E
RTI - MONETARY L (Original source	OANS RECEIVED <u>THIS</u> REPORTIN e of loan, such as a bank, must be sl	G PERIOD hown if a third party is invo	lved. Include loans from c	andidate's personal f	unds.)
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS O (Include Endorser's Name,	DF LENDER If Applicable)	RELATIONSHIP T CANDIDATE (If Applic	O AMOUNT C	F LOA
				\$	
RT II - MONETARY	LOAN REDAYMENTS MADE THE	·	TOTAL (PART I)	\$_0	
(Loans forgive	LOAN REPAYMENTS MADE <u>THIS</u> on must be reported on Schedule E NAME AND ADDRESS O	In-kind Contributions.) F LENDER			PEPAID
(Loans forgive	n must be reported on Schedule E	In-kind Contributions.) F LENDER	TOTAL (PART I) RELATIONSHIP TO CANDIDATE* (If Applic	O AMOUNT R	EPAID
(Loans forgive	n must be reported on Schedule E NAME AND ADDRESS O	In-kind Contributions.) F LENDER	RELATIONSHIP TO) AMOUNT R	REPAID
(Loans forgive	n must be reported on Schedule E NAME AND ADDRESS O	In-kind Contributions.) F LENDER	RELATIONSHIP TO	O AMOUNT R	EPAID
(Loans forgive	n must be reported on Schedule E NAME AND ADDRESS O	In-kind Contributions.) F LENDER	RELATIONSHIP TO	O AMOUNT R	EPAID
RT II - MONETARY (Loans forgive	n must be reported on Schedule E NAME AND ADDRESS O	In-kind Contributions.) F LENDER	RELATIONSHIP TO	O AMOUNT R	EPAID
DATE PAID	n must be reported on Schedule E NAME AND ADDRESS O	F LENDER If Applicable)	RELATIONSHIP TO	O AMOUNT R	EPAID
(Loans forgive	NAME AND ADDRESS O	F LENDER If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applic	AMOUNT R	EPAID

FOR INSTRUCTIONS, SEE BACK OF FORM